

Almond Court Care Home Care Home Service

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Unannounced

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Service provided by:

Tower Bridge Homes Care Limited

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About the service

Almond Court Care Home provides care and support for 40 persons in a purpose-built building located in the Drumchapel area of Glasgow. The provider is Tower Bridge Homes Care Limited. The service was provided over two floors and people who used the service had individual bedrooms with ensuite facilities. There were communal lounges and dining rooms within each floor.

Residents had access to a light and bright lounge located in the foyer which provided tea making facilities to entertain their visitors.

There was a garden area accessible to all persons who use the service. To the front of the property visitors have access to car parking facilities.

The care home's aims and objectives were to provide long term, short break or respite places for people over 65 years and who suffer with dementia.

At the time of the inspection the care service had three vacancies.

What people told us

We received four completed questionnaires from people who experience support and five from relatives and friends. We spoke with people who use the service and visitors during the inspection. The responses from all people was that they were positive about the service.

"I feel the staff look after me well."

"I like being in my room don't like to be in the sitting room."

"The care and support given by staff helps relatives and friends to know they are being well looked after. I am always informed of any changes in my relative's condition and am involved in any decisions to be made regarding outcome."

"Our relative is very settled and is encouraged to participate in events. Staff are fantastic and communicate well with family and we see there is always someone in the lounge. Manager is here all the time which is great. Our relatives' room is spotless and laundry is never lost because it is labelled."

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	not assessed
How good is our staffing?	not assessed

How good is our setting?	not assessed
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

People spoken with during the inspection told us they were treated with dignity and respect, and a genuine warmth. They told us they experienced care and support with compassion which was reflected in the positive relationships between staff and the people using the service, and the way they were supported to achieve individual outcomes. For example, respecting people's independence, choice and control, enabling people to participate in events with their peers and the wider community.

People said they knew the management because they were visible in the units and were approachable. People said they felt they could raise any concerns that they had with management style and had the expected impact for the individual.

Staff were observed to know people's daily routines and communicated in a style that suited their needs. We observed that interactions and attention were ensured through the lounge having a staff presence. This provided stimulation and reduced long periods of time just being seated, sleeping or passively watching, which could have compromised their wellbeing, both physical and mental health. Staff understood the importance of meaningful activity on people's wellbeing. People were supported to enjoy activities and pastimes of their choosing at a level and pace that was manageable for them. Examples included a person who experiences support enjoyed using glitter on the Christmas card she was making. She told us she enjoys watching her support worker colour in. This meant the activities were failure free and helped people maintain their self esteem and reduce anxiety and agitation.

People told us they "never get bored; day to day varies and we are involved in some tasks including visiting the polling station". The service was striving to develop strong links with local nursery and school children for intergenerational activity which would provide positive stimulation. People who experience support share the transport with their sister care home so spontaneity for outings were limited.

Where required staff monitored and recorded individual's food and fluid intake to ensure they had not become dehydrated or malnourished. People had participated in menu planning and had shared their views with the catering staff. We observed that people were provided with healthy meals and snacks, including fresh fruit and vegetables, to help maintain their nutritional health and wellbeing. At mealtimes people were offered choices and appeared to enjoy their personal selection. They also had easy access to snacks and drinks throughout the day.

Staff had a good understanding of the individual's preferences and wishes as well as current healthcare needs which gave people confidence and reassurance. To remain as healthy as possible people were supported by the local GP service, health professionals and the care home trained staff. Staff used recognised assessment tools to monitor the health status of people using the service and where required referred for input from external professionals. This means that interventions were made quickly to help keep people well.

We saw that the storage of medication takes place in a central point within each unit. Protocols were in place to protect the welfare of people who received their medication from staff and copies of the legal framework are recorded within the individuals care plan. The evidence of the medication records sampled were found to show that staff often used other interventions in advance of accessing medications for people who show stressed and distressed behaviour.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

4 - Good

People could be confident that they would experience high quality care and support that was right for them. People told us they felt they were at the centre of their own service. They were recognised as experts on their own experiences, needs and wishes and fully involved in decisions about their care and support. Each personal plan sampled contained detailed information on how to support the person and updated monthly or when people's needs, and circumstances changed. The personal plans that were reviewed reflected the individual and people important to them had been consulted and had input to ensure the plan was informative. We saw the plans contained details of people's life history, daily routines, food preferences and how they liked to spend their day.

We could see that the care plans were large documents, the file lacked a person-centred focus on outcomes. The provider had a corporate style of content lay-out for the care plans. The contents did not flow particularly well, and we could see that there was some inconsistency when personal plans and assessment tools were reviewed. Care planning standards were under review through management involvement and staff training, which was included in the service's quality assurance system, to protect the welfare of people who experience support.

People could be confident that the provider and the service had an improvement and development plan which is important for good governance and outcomes for people. We discussed the need to include areas of priority and improvement, scrutiny of the outcome of the organisations test of change and record the action taken on the improvement journey to assist in the development of the service, for example care planning. (See Area for Improvement One).

People could be confident that their health and wellbeing was protected by trained staff who administered medication. However, we discussed with the service the need to review some of their medication management procedures to ensure administration is carried out with privacy and dignity and meets the individual's choices.

Staff who took part in the inspection told us they were qualified to a recognised level for registration purposes with Scottish Social Services Council and Nursing and Midwifery Council and felt confident to meet the assessed needs of the people they support. Our findings through sampling records was that the provider checked the registration status of their employees and retained a record to protect the health and wellbeing of the residents. The provider had quality assurance and audit processes to identify training requirements for each staff member. The management and staff had access to best practice guidance publications to ensure that health and wellbeing and outcomes for people are protected, such as implementation of risk assessments, individual's nutrition and hydration to prevent unnecessary weight loss and management of falls. People were confident that staff knew how to support them, because of the skill mix and experience on each shift.

Areas for improvement

1. The service should ensure that each individual care plan is developed in line with the outcome of the providers inhouse test of change and continuous improvement agenda for care planning.

This ensures care and support is consistent with the Health and Social Care Standards which state "I am fully involved in developing and reviewing my personal plan, which is always available to me". (HSCS 2:17)

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order that people experience living in a high quality environment which meets people's individual needs, the manager should ensure that:

- the lounge and dining areas worn furnishings are replaced
- any torn or marked wallpapered and painted areas within the home are renewed
- contrasting accessories are provided in toilet areas to aid people's independence
- people requiring the use of a hoist are provided with their own sling
- people's continence products are kept in their own bedrooms and not left in communal or store areas.

This ensures care and support is consistent with the Health and Social Care Standards, which state that 'the premises have been adapted, equipped and furnished to my needs and wishes' (HSCS 5.16); 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22)

This area for improvement was made on 8 October 2018.

Action taken since then

The area for improvement is not met.

Two parts of the area for improvement have been completed and the other two are outstanding.

People who require the use of a hoist have their own personalised sling.

Continence products are prescribed for an individual and stored in their own bedrooms to protect their privacy and dignity.

The care home's maintenance and improvement plan indicates that redecoration and refurbishment has been partially completed but they are awaiting some new furnishing and the wallpaper and painting has started but not yet completed.

Previous area for improvement 2

In order to ensure that people receive care and support which is personal to them, the manager should ensure that care records reflect a person-centred and outcome focused approach. Care reviews should also help to identify future plans and goals.

This ensures care and support is consistent with the Health and Social Care Standards, which state that 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices (HSCS 1.15); 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected (HSCS 1.23).

This area for improvement was made on 8 October 2018.

Action taken since then

This area for improvement is not met.

Further to discussion with the quality improvement manager we were told that they were in the process of piloting the new care planning and review documentation in a small number of sister care homes across Scotland. The provider will review the experience and outcome of the test of change and only then will roll out the new care plan format across all their care homes.

Further to assessing the changes, staff will receive training to use the new documentation.

The quality improvement manager told us that there was no timescale for completion of this continuous improvement journey as they wanted to get it right.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good

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